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Bib Data Sheet

CONFIRMATION NO. 1582

|   |   |                               |   |  |
|---|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/635,992  | <b>FILING OR 371(c) DATE</b><br>08/06/2003<br><b>RULE</b>   | <b>CLASS</b><br>326           | <b>GROUP ART UNIT</b><br>2819   | <b>ATTORNEY DOCKET NO.</b><br>3242P028D1 |
| <b>APPLICANTS</b><br>Brian Fox, Sunnyvale, CA;<br>Andreas Papaliolios, Sunnyvale, CA;<br>Steven P. Winegard, Sunnyvale, CA;<br>Edmond Y. Cheung, San Jose, CA;  |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a DIV of 09/418,416 10/15/1999 PAT 6,624,656   |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/04/2003</b>  |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>12   | <b>TOTAL CLAIMS</b><br>2                 |
| <b>INDEPENDENT CLAIMS</b><br>2  |   |                               |   |  |
| <b>ADDRESS</b><br>24309   |   |                               |   |  |
| <b>TITLE</b><br>Input/output circuit with user programmable functions   |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>750   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |